

# **Emergency Droug**

State of Washington



For Ecology Us

Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.

Section 1	. APPLI	CANT -	PERSON	N, ORGAI	NIZATION, OF	WAT	DRESIYS	TEM	
				•	Home Tel:				_
Mailing Add	ress 129	11 KEL	LUM K	0	Work Tel:(	509) 9	752- <u>56</u>	46	
City Our	Look	St	ate WA Zi	ip+4 <u>9893</u>	38+9798 FAX:	309) 8	37-88	96	_
4 .	2. CONT as above	ACT - P	DRSON (	ro Calai	ABOUT THE	APPLI	CATIO	N	
Name					Home Tel:				_
Mailing Add	ress				Work Tel:(	)_			_
City		St	ateZi	ip+4	+ FAX:(	)_			_
Relationship	to applicant								
Soution	RANKAN	awirne	OF INTE					śa 100 100 100 100 100 100 100 100 100 10	
	if the water	use is propo	osed for a sh		ect. Indicate the peri		e that the v	vater will be n	eeded
	I. WATE		KOD.						
	CE WATE				If GROUNDWATER				
lake, etc. If	funnamed, v		e if stream, s ned spring,"		A permit is desired for well(s).  Constructed under Ground				
stream," etc	?. <b>:</b>				WATER PERMIT NOG4-30241P				
Number of	diversions: _				WELL LOG	ATT	TENTED		
Source flow	vs into (name	e of body of	water):		Size & depth of well(s):				
LOCATIO	N				70 70		802	acep	
Enter the n	orth-south	and east-w	est distance	es in feet fro	m the point of dive	rsion or v	withdrawa	al to the neare	est
section con				AND 138 SCTION S	OFF BAST O	FTHE	NWI	×	
1/4 of	¼ of	Section				Ifloca		e is platted, comp	lete
/4 O1	7101	Section	Township	Range(E/W)	County	Lot	Block	low: Subdivision	ı
NE	NW	5	10	2 2	YAKIMA				
10 2	1110	3	10		71416114111				
For Ecology Us	e Date Rec	eived: MAA	ar 17, 2	eo5 Prior	ity Date: Miseou 17	260		VARU	иA
SEPA: Exempt		FERC Licens			Dept. Of Health #			34	7 0
Data Assented	As Complete	13/17/07	By	Date	Returned	By	WRI	A. 01	

Appl. No.: 64-32983-05

4.32983

**APPLICATION** 

ECY 040-1-14 Rev. 7/01 \* \* f

Sec	tion 5. GENERAL WATER SYSTEM INFORMATION								
A.	Name of system, if named:								
B.	Briefly describe your proposed water system. (See instructions.)								
	WHEEL LINES - HANDLINES - SOLID SET OPERATED BY								
	EXISTING SUBMERIBLE PUM?								
C.	Do you already have any water rights or claims associated with this property or system? ☐ YES ☑ NO PROVIDE DOCUMENTATION.								
Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION (Completed for all domestic/public supply uses.)									
Α.	Number of "connections" requested:  Type of connection  (Homes, Apartment, Recreational, etc.)								
В.	Are you within the area of an approved water system?   If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.								
Com	plete C. and D. only if the proposed water system will have fifteen or more connections.								
C.	Do you have a current water system plan approved by the Washington State Department of Health?   If yes, when was it approved? Please attach the current approved version of your plan.								
D.	Do you have an approved conservation plan?  If yes, when was it approved? Please attach the current approved version of your plan.								
Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION (Complete for all irrigation and agriculture uses.)									
A.	Total number of acres to be irrigated:/50_								
B.	List total number of acres for other specified agricultural uses:								
	Use CHERRY TREES Acres 15								
	Use CHERRY TREES Acres 15 Use CORN FOR SILAGE Acres 135 Use Acres								
C.	Total number of acres to be covered by this application: _/56								
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977)  Add up the acreage in which you have a controlling interest, including only:  ‡ Acreage irrigated under water rights acquired after December 8, 1977;  ‡ Acreage proposed to be irrigated under this application;  ‡ Acreage proposed to be irrigated under other pending application(s).								
	<ol> <li>Is the combined acreage greater than 6000 acres?</li> <li>Do you have a controlling interest in a Family Farm Development Permit?</li> <li>If yes, enter permit no: ☐ YES ☑ NO</li> </ol>								
È.	Farm uses: Stockwater - Total # of animals Animal time (If dairy cettle are heley)								
	Stockwater - Total # of animals Animal type (If dairy cattle, see below)  Dairy - # Milking # Non-milking								



### Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

☐ YES 🕱 NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

## Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

FROM SUNNYSIDE GOWEST ON YAKIMAVALLEY HIWAY TO NORTH OUTLOOK, THEN NORTH TOKELLUM RD THEN WEST TOSME

## Section 10. REQUIRED MAP

A.

A. Attach a map of the project. (See instructions.)

### Section 11. PROPERTY OWNERSHIP

- If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):
- B. Does the applicant own the land on which the water source is located? If no, submit a copy of agreement:

Does the applicant own the land on which the water will be used?

YES INO

YES NO

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

Applicant for authorized representative)

Date

3/11/05

Landowner for place of use (if same as applicant, write "same")

Date

We are returning your application for the following reason(s): Examination fee was not enclosed APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128 Section number(s) is/are APPLICANT PLEASE RETURN TO THE APPROPRIATE incomplete **REGIONAL OFFICE** Explanation: Please provide the additional information requested above and return your application by Ecology staff\_ Date

Ecology is an Equal Opportunity employer. To receive this document in alternative format, contact the Water

**APPLICATION** 

Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).

Use this page to continue your answers to any questions on the application. Please indicate section

number before answer.